



JOINT SUBCOMMITTEE TO STUDY MENTAL HEALTH SERVICES IN THE COMMONWEALTH IN THE 21ST CENTURY

SECRETARY OF HEALTH AND HUMAN RESOURCES DANIEL CAREY, M.D.

SJ 47 ACCOMPLISHMENTS

STEP-VA

- System Transformation Excellence and Performance (STEP-VA)
- Innovative initiative for individuals with behavioral health disorders featuring a uniform set of required services, consistent quality measures, and improved oversight in all Virginia communities.
- Based on a national best practice model that requires the development of a set array of deliberately chosen services that make up a comprehensive, accessible system for those with serious behavioral health disorders.

Housing Work Group

Passed budget language requiring the Department of Housing and Community
 Development to develop and implement strategies for housing individuals with serious
 mental illness and report annually such strategies and their implementation

THE BEHAVIORAL HEALTHCARE (BH) LANDSCAPE



- BH issues drive up to 35% of medical care costs.
- Care for people with BH disorders costs up to 2-3 times as much as those without such disorders.
- State hospital capacity average: 15 beds per 100,000 people.
- National average of state spending on hospitals = 23% of overall BH budget.
- National average of state spending on community = 75% of overall BH budget (~\$89 per capita, 2013).



In 2013, VA was 31st in non-Medicaid GFs for BH at \$92.58 per person. Median (Ohio) was \$100.29 per person.

- Roughly 50% of GF dollars for BH supports 3% of persons served.
- State Hospital Capacity: 17.3 beds per 100,000 people.
- Virginia spending on hospitals = 49% of overall BH budget in FY18.
- Virginia spending on community = 48.5% of overall BH budget, FY18 (\$47 per capita, 2013).

THE WAY AHEAD

Medicaid Expansion

- Expansion will help address issues in Virginia's behavioral health system
 - Expand access
 - Ensure consistency of services, regardless of location
- Expanding Medicaid would provide nearly 400,000 Virginians with the health care they need when they need it.
- When low-income families have access to high quality, affordable health care, they have better health outcomes in the short and long-term.

GOVERNOR NORTHAM'S HEALTH CARE GOALS & STRATEGIES

Substance Abuse Treatment

- Vision:
 - Every person in Virginia with a substance use disorder will have access to timely, evidence-based treatment and recovery services. Virginia will be a national leader in identifying interventions to prevent addiction.
- Strategies
 - Expand the Addiction Recovery Treatment Services (ARTS) program
 - Increase trained providers for evidence-based treatment
 - Support services for people in recovery
 - Engage localities and promote community collaboration around prevention, treatment, and harm reduction
 - Collaborate with stakeholders

GOVERNOR NORTHAM'S HEALTH CARE GOALS & STRATEGIES

Behavioral Health and Developmental Services

- Vision:
 - Virginia has a behavioral and developmental health system that provides a comprehensive, evidence-based, and cost-effective continuum of care that creates positive outcomes for individuals, families and stakeholder groups.
- Strategies
 - Medicaid expansion
 - EXECUTE and BUILD on STEP-VA
 - Increase community-based services TO FINANCIALLY REALIGN PUBLIC FACILITIES
 - Partner with S.J. 47
 - Ongoing response to DOJ settlement and ID/DD waiver implementation

System

How do we collaborate and create MORE alignment between behavioral health programs and providers to promote the integration of behavioral health screening and treatment into schools, primary care, emergency department, jails, and courts to ensure that we meet the needs of people with mental illness and substance use disorder where they present?

Metrics

What are 5 – 7 individual and population level metrics the Commonwealth can implement, for both public and private providers, to evaluate the quality and outcomes of the overall behavioral health system.

Quality & Accountability

How to promote standards and accountability for providers to ensure adequate monitoring and oversight across behavioral health services, both public and private, that includes improving program integrity, quality management reviews and delivering of high quality, evidenced based services?

Finances

How do we align payment across public and private providers to incentivize evidence-based best practices, link payment to performance on quality measures, and transition toward value-based payments? This includes leveraging the carving in of the community-based mental health services into Medicaid Managed Care to integrate behavioral and physical health and improve outcomes. This also is about the facility/community financing continuum.

THANK YOU

Dr. Daniel Carey, MD

Secretary of Health and Human Resources

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